DLN: 93493276006453

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2011 calendar year, or tax year beginning 12-01-2011 and ending 11-30-2012 D Employer identification number C Name of organization AMERICAN FARM BUREAU FEDERATION B Check if applicable 36-0725160 Address change Doing Business As E Telephone number Name change (202)406-3600 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 600 MARYLAND AVE SW NO 1000W **G** Gross receipts \$ 34,004,291 Terminated City or town, state or country, and ZIP + 4 WASHINGTON, DC 20024 Amended return Application pending Name and address of principal officer $\mathbf{H}(\mathbf{a})$ Is this a group return for JULIE ANNA POTTS ┌ Yes ┌ No affiliates? 600 MARYLAND AVE SW NO 1000W WASHINGTON, DC 20024 H(b) Are all affiliates included? ┌ Yes ┌ No If "No," attach a list (see instructions) □ F01(c)(2) □ F01(c) (F) ■ (uncert po) □ 4047(a)(1)

I 1a	x-exem	$\frac{1}{1} \frac{1}{1} \frac{1}$	H(c) Group exempt	ion nu	ımber 🟲	
J W	ebsite	e: ► WWW FB O RG				
K For	n of or	ganization 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other ►	L Year of formation 19	20 N	M State of legal domicile IL	
Pa	rt I	Summary				
nance	:	Briefly describe the organization's mission or most significant activities AFBF IS THE UNIFIED NATIONAL VOICE OF AGRICULTURE WORKING THR TO ENHANCE AND STRENGTHEN THE LIVES OF RURAL AMERICANS AND T AGRICULTURAL COMMUNITIES				
Activities & Governance		Check this box F if the organization discontinued its operations or disposed o	1	net a	ssets 34	
		Number of independent voting members of the governing body (Part VI, line 1b)		4	33	
		Total number of individuals employed in calendar year 2011 (Part V, line 2a) .	5	92		
PAC		Total number of volunteers (estimate if necessary)	6	5 51		
		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0	
	ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0	
			Prior Year		Current Year	
	8	Contributions and grants (Part VIII, line 1h)	444,0	000	308,421	
Revenue	9	Program service revenue (Part VIII, line 2g)	25,323,	136	25,017,308	
<u> </u>	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,152,	566	1,028,523	
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	293,	559	472,357	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,213,	261	26,826,609	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,071,	700	533,750	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0	

			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	444,000	308,421
Revenue	9	Program service revenue (Part VIII, line 2g)	25,323,136	25,017,308
9.6	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,152,566	1,028,523
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	293,559	472,357
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,213,261	26,826,609
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,071,700	533,750
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
82	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines $5-10$)	14,200,041	14,965,012
€ 6	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	11,796,077	11,970,514
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	27,067,818	27,469,276
	19	Revenue less expenses Subtract line 18 from line 12	1,145,443	-642,667
Net Assets or Fund Balances			Beginning of Current Year	End of Year
35.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00	20	Total assets (Part X, line 16)	52,576,004	53,715,088
A DE	21	Total liabilities (Part X, line 26)	4,873,220	5,615,163
<u> 22</u>	22	Net assets or fund balances Subtract line 21 from line 20	47,702,784	48,099,925

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any

	*****		20:	13-10-03
Sign Here	Signature of officer	te		
iere	JULIE ANNA POTTS EXECUTIVE VICE PRESIDENT Type or print name and title			
Paid	Preparer's signature LU ANN TRAPP	Preparer's taxpayer identification number (see instructions) P01506476		
Preparer's Use Only	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN > 38-1357951		
	CHICAGO, IL 60606		Phone no (312) 207-1040	

Part IV	Chec	klist of	Required	Schedules
	CHEC	KIISL UI	Reduired	Scriedures

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νo
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νo
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizat the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	ions in 21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United St on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	ates 22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24 complete Schedule K. If "No," go to line 25			No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	· 24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	· · 24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction a disqualified person during the year? If "Yes," complete Schedule L, Part I	n with 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pri year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E. "Yes," complete Schedule L, Part I			
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	ee, or 26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantibutor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	tantial 27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, P instructions for applicable filing thresholds, conditions, and exceptions)	art IV		
a	A current or former officer, director, trustee, or key employee? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV .	f) was 28 c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," comp. Schedule N, Part II	lete 32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulation sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	ns 📆 33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III and V, line 1	7, IV, 34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13) [?] 35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within t meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	he 35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable relationganization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	:ed 36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	5 37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

•	,
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check it Schedule O contains a response to any question in this Part V	<u> </u>	• 1	
_	Enterthe number reported in Paul 2 of Forms 1006. Entert O. March anniversal in		Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return	21	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ı	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	, [
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand 13c			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

Se	ction A. Governing Body and Management					
					Yes	No
_		ı				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	34			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	33			
2	Did any officer, director, trustee, or key employee have a family relationship or a bust other officer, director, trustee, or key employee?	iness	relationship with any	2		No
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?	-	•	4		No
5	Did the organization become aware during the year of a significant diversion of the organization	aanız	ation's assets?	5		No
6	Did the organization have members or stockholders?	_		6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?	erto e	elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval	by) r		7b	165	No
8	or persons other than the governing body?		ndertaken during the			
	year by the following				.,	
a	The governing body?			8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, vorganization's mailing address? If "Yes," provide the names and addresses in Schedu	ıle O		9		No
	ction B. Policies (This Section B requests information about policies not r	equi	red by the Internal			
Re	venue Code.)				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	140
	If "Yes," did the organization have written policies and procedures governing the activ		of such chapters	100	103	
_	affiliates, and branches to ensure their operations are consistent with the organization purposes?			10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its the form?	gov	erning body before filing	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Fo	rm 9	90			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually rise to conflicts?	ıntei	rests that could give	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? If "Yes," describe	12c	Yes	
13	Did the organization have a written whistleblower policy?	• •		13	Yes	
14	Did the organization have a written document retention and destruction policy? .			14	Yes	
15	Did the process for determining compensation of the following persons include a review independent persons, comparability data, and contemporaneous substantiation of the				100	
а	The organization's CEO, Executive Director, or top management official			15a	Yes	
	Other officers or key employees of the organization			15b	Yes	
_	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)	-				
	,					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	r sım •	ılar arrangement wıth a	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organiz participation in joint venture arrangements under applicable federal tax law, and take	step	s to safeguard the			
	organization's exempt status with respect to such arrangements?	•		16b		
	ction C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable (3)s only) available for public inspection. Indicate how you made these available. Che					

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 CHRISTY LILJA 600 MARYLAND AVE SW SUITE 1000W

WASHINGTON, DC 20024

(202) 406-3732

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	mor unles an	on (d e tha s per offic	n one son er ar	not check one box, on is both and a rustee)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	Name and Title A verage hours more than one box, compensation compensation per unless person is both week (describe director/trustee) A verage hours more than one box, compensation from the organization (W- organization (W- 2/10 years)) A verage hours director/trustee) A verage hours director/trustee)							Reportable compensatior from related organizations (W- 2/1099-	,	(F) Estimated amount of other compensation from the organization and related			
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former					organiza	
See A	dditional Data Table											+		
												+		
												十		
												\top		
1b	Sub-Total							P						
c d	Total from continuation sheets Total (add lines 1b and 1c) .	to Part VII, Sec			· · ·	<u>.</u>		<u> </u>		3,837,249		0		1,025,782
2	Total number of individuals (incl	udıng but not lın	nıted to	thos	e lis	sted) who	o receive	ed more tha	an			
	\$100,000 of reportable compen	sation from the	organız	ation	₽ -34									
_		66											Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch											3	Yes	
4	For any individual listed on line : organization and related organiz											_		
5	Did any person listed on line 1a	receive or accru	ie com	• pensa	• atıor	• n fro	manv	• unre	· · ·	anızatıon o	or individual for	4	Yes	
	services rendered to the organiz						-		-		•	5		No
	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
	<u>-</u>	(A) ne and business ad	dress							Desc	(B) ription of services		(C Compe	
110 V	STREET NETWORK INC VALL STREET YORK, NY 10005										/ARE DEVELOPMENT		,	779,615
1001 WASH	VELL & MORNING LLP PENNSYLVANIA AVENUE NW IINGTON, DC 20004									AFBF LLC LE	GAL SERVICES			653,138
1300 WASH	ANCE ABRAMS BERDO & GOODMAN LLC 19TH STREET NW SUITE 600 INGTON, DC 20036									AFBF LEGAL	SERVICES			373,855
1096	AT PRODUCTIONS O WILSHIRE BLVD 5TH FLOOR NGELES, CA 90024									AFBF SPEAK	ER FEE	ZER FEE 150,000		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization \blacktriangleright 4

Form 99								Page 9
Part \	/1111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts ots	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	b	Membership du	ies 1b					
s, ç	c	Fundraising ev	ents 1c					
<u>ਜ਼</u> ੁੱਛ	d	Related organiz	zations 1d					
Ψ.E	e	Government grant	s (contributions) 1e					
tion sr s	f	All other contribute	ons, gifts, grants, and 1f	308,421				
ं इंक्	g		ibutions included in					
ĔĚ				.				
<u>ठ</u> ह	h	Total. Add lines	s 1 a - 1 f		308,421			
<u>e</u>				Business Code				
E F	2a	MEMBERSHIP DUE	S	900099	24,606,008	24,606,008		
æ	Ь	SPONSORSHIP REV	/ENUE	900099	411,300	411,300		
-31	С							
Zer.	d							
E.	e							
Program Service Revenue	f	All other progra	am service revenue					
ΔŤ	g	Total. Add lines	s 2a-2f		25,017,308			
	3		ome (including dividen					
		and other sımıl	aramounts)	▶ [1,086,754			1,086,754
	4	Income from inves	stment of tax-exempt bond	proceeds				
	5	Royalties		, 				
	 	C	(ı) Real 457,118	(II) Personal				
	6a b	Gross rents Less rental	437,118					
	-	expenses Rental income	457,118					
	C	or (loss)						
	d	Net rental inco	me or (loss)	-	457,118			457,118
	7a	Gross amount	(ı) Securities 7,069,403	(II) Other				
	⁷	from sales of assets other	7,005,105					
		than inventory	- 105 010					
	b	Less cost or other basis and	7,125,849	1,785				
	_c	sales expenses Gain or (loss)	-56,446	-1,785				
	d	Net gain or (los			-58,231			-58,231
	8a		rom fundraising					
Other Revenue			luding s reported on line 1c) ne 18					
Ā	ь	Less directles	penses b					
₹	c		(loss) from fundraising	events 🕨				
	9a		rom gaming activities ne 19					
	b c		penses b (loss) from gaming acti					
	10a	Gross sales of returns and allo		65,287				
	ь	Less costofa	oods sold b	50,048				
	С		(loss) from sales of inv		15,239	15,239		
		Miscellaneou	s Revenue	Business Code				
	11a							
	ь							
	С							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d	🛌				
	12	Total revenue.	See Instructions .	· .	26,826,609	25,032,547	0	1,485,641

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	533,750			
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,985,133			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	7,234,981			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	4,066,565			_
10	Payroll taxes	678,333			
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,153,085			
c	Accounting	116,264			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	342,894			
12	Advertising and promotion	403,344			
13	Office expenses	151,064			
14	Information technology				
15	Royalties				
16	Occupancy	3,116,233			
17	Travel	4,291,063			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	706,850			
23	Insurance	132,873			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	PROGRAMS	1,773,359			
b	FARM BUREAU NETWORK	369,495			
c	DUES AND SUBSCRIPTIONS	187,177			
d	TELEPHONE	165,614			
e					
f	All other expenses	-938,801			
25	Total functional expenses. Add lines 1 through 24f	27,469,276			
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				orm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 8,673,562 8,603,652 1 1 2.869.220 2.757.111 2 2 3 3 274.186 4 4 273.092 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 600.831 9 410.960 Prepaid expenses and deferred charges 10a 10,171,828 Land, buildings, and equipment cost or other basis *Complete* Part VI of Schedule D 10a 10b 5,258,108 4,976,415 **10c** b Less accumulated depreciation 4,913,720 17,861,836 20,209,400 11 11 14,033,035 14,293,527 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 3,286,919 15 15 2,253,626 52,576,004 53,715,088 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 1,470,426 2,245,822 17 17 Accounts payable and accrued expenses . 18 18 19 23,100 19 49,350 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 3,379,694 25 3,319,991 D 26 4,873,220 26 5,615,163 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 47,702,784 27 48,099,925 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 47.702.784 33 48.099.925 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 52.576.004 53.715.088

Pai	Check if Schedule O contains a response to any question in this Part XI			. 	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		26,8	326,60
2	Total expenses (must equal Part IX, column (A), line 25)	2			169,27
3	Revenue less expenses Subtract line 2 from line 1	3		-6	542,66
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		47,7	702,78
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,0	39,80
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		48,0	99,92
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Software ID: Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Independ	ent C	ontr	act	ors					
(B) Average hours		ition	(che	y)			(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other compensation
week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
40 00	Х		х				683,646	0	222,806
2 00	Х		х				43,213	0	0
2 00	Х						7,500	0	0
2 00	Х						14,100	0	0
2 00	Х						17,100	0	0
2 00	Х						8,400	0	0
2 00	Х						20,750	0	0
2 00	Х						15,900	0	0
2 00	Х						9,400	0	0
2 00	Х						12,300	0	0
2 00	Х						6,600	0	0
2 00	Х						7,800	0	0
2 00	Х						13,700	0	0
2 00	Х						11,300	0	0
2 00	Х						9,050	0	0
2 00	Х						8,400	0	0
2 00	Х						9,650	0	0
2 00	Х						9,200	0	0
2 00	Х						13,950	0	0
2 00	Х						11,050	0	0
2 00	Х						10,400	0	0
2 00	Х						13,200	0	0
2 00	Х						12,000	0	0
2 00	Х						14,500	0	0
2 00	Х						15,300	0	0
	(B) Average hours per week 40 00 2 00 2 00 2 00 2 00 2 00 2 00 2	(B) A verage hours per week Possible 40 00 X 2 00 <td>(B) Average hours per week Position statutional Instautional Instauti</td> <td>(B) Average hours per week</td> <td> Co</td> <td> Average hours per week</td> <td> Company Position (check all that apply) Position (check all that app</td> <td> RB</td> <td> Column C</td>	(B) Average hours per week Position statutional Instautional Instauti	(B) Average hours per week	Co	Average hours per week	Company Position (check all that apply) Position (check all that app	RB	Column C

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and I (A) Name and Title	(B) Average hours	Pos		C) (che	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Office		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
MICHAEL WHITE DIRECTOR	2 00	Х						10,700	0	0
DAVID WINKLES DIRECTOR	2 00	Х						11,400	0	0
WAYNE WOOD DIRECTOR	2 00	Х						10,100	0	0
LARRY WOOTEN DIRECTOR	2 00	Х						14,100	0	0
BLAKE HURST DIRECTOR	2 00	Х						11,400	0	0
RANDY KNIGHT DIRECTOR	2 00	Х						9,300	0	0
BEN LACROSS DIRECTOR	2 00	Х						16,200	0	0
PATRICIA LANGENFELDER DIRECTOR	2 00	х						5,500	0	0
PAUL WENGER DIRECTOR	2 00	Х						7,700	0	0
ELLEN STEEN GEN COUNSEL & SECRETARY	40 00			×				238,159	0	63,086
JULIE ANNA POTTS EXT VP & TREASURER	40 00			х				241,279	0	77,677
MARK A MASLYN EXECUTIVE DIRECTOR, PUBLIC POLICY	40 00				x			245,246	0	75,626
DONALD M LIPTON EXECUTIVE DIRECTOR, PUBLIC RELATIONS DEPT	40 00				х			200,008	0	65,664
CHRISTINA S LILJA EXECUTIVE DIRECTOR, ACCOUNTING & ADMIN SERVICES	40 00				x			181,384	0	56,894
MARGEE WOLFE EXECUTIVE DIRECTOR, ORGANIZATION	40 00				х			160,691	0	61,804
ROBERT E YOUNG CHIEF ECONOMIST	40 00					х		233,727	0	74,887
MARY KAY THATCHER DIRECTOR, PUBLIC POLICY	40 00					Х		181,273	0	56,850
PAUL SCHEGEL DIRECTOR, PUBLIC POLICY	40 00					Х		160,243	0	44,179
DAVID C FRANCIS DIRECTOR, INFORMATION TECHNOLOGY & COMMUNICATIONS	40 00					х		160,934	0	55,954
RICHARD L KRAUSE SR DIRECTOR, PUBLIC POLICY	40 00					Х		153,949	0	53,595
RICHARD NEWPHER EXT VP & TREASURER (THROUGH 10/6/11)	40 00						х	585,547	0	116,760

DLN: 93493276006453

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the o	rganization
AMERICAN FARM	BUREAU FEDERATION

Employer identification number

36-0725160

Part I-A	Complete if the organization is exemp	ot under section 501(c) or is a section 52	27 organization.

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- Political expenditures
- 3 Volunteer hours

art I-B	Comp	<u>lete if</u>	the	organi:	<u>zation i</u>	s exem	<u>pt unde</u> i	<u>r section</u>	501(c)((3)).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made?
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year?

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

Yes

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. So of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. So of the excess over \$1,000,000 Fig. So of the excess over \$1,000			expenses, and share of excess lob	bying expenditures)		_	•	
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g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
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i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
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(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

che	edule C (Form 990 or 990-EZ) 2011				Pa	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has f (election under section 501(h)).	NOT f	iled F	orm	5768	3
		(a)		(b)	
		Yes	No	1	Amoun	it
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			4		
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			4		
C	Media advertisements?		<u> </u>	╀		
d	Mailings to members, legislators, or the public?			ــــــ		
e	Publications, or published or broadcast statements?			ـــــــ		
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1:					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		L	1	Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a	<u> </u>			
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				

Part IV Supplemental Information

5 Taxable amount of lobbying and political expenditures (see instructions)

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11 Also, complete this part for any additional information

Identifier | Return Reference | Explanation

5

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493276006453

OMB No 1545-0047

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Department of the Treasury

Open to Public Inspection

Internal Revenue Service

Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

	OF the organization AN EARM RIDEALLEEDERATION		Em	ployer identification number
, i Livio,	WITHIN BONESO FEBERATION		36	-0725160
art I			nilar Funds	or Accounts. Complete if the
		(a) Donor advised funds	;	(b) Funds and other accounts
Tot	tal number at end of year			
Αg	gregate contributions to (during year)			
Αg	gregate grants from (during year)			
Αg	gregate value at end of year			
				vised Yes No
us	ed only for charitable purposes and not for the ben			ner purpose
		if the organization answered	"Ves" to For	
Г Г с°	Preservation of land for public use (e g , recreated Protection of natural habitat Preservation of open space mplete lines 2a-2d if the organization held a qual	on or pleasure)	tion of an histo tion of a certifi	ed historic structure
ea	sement on the last day of the tax year			Held at the End of the Year
То	tal number of conservation easements		2a	Tield de the End of the Fedi
				+
Aggregate contributions to (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? If ye are organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the benefit of the donor or donor advisor in which is a donor advised funds and the second purpose of conservation easements. Complete in the apply purpose (a) of conservation for public use (e.g., recreation or pleasure) Preservation of an advisor purpose and not for public use (e.g., recreation or pleasure) Preservation of a certified historic structure included in (a) Preservation of conservation easements Total acreage restricted by conservation easements Number of conservation easements included in (c) acquired after 8/1.7/06 Number of conservation easements included in (c) acquired after 8/1.7/06 Number of conservation easements included in (c) acquired after 8/1.7/06 Number of conservation easements included in (c) acquired after 8/1.7/06 Number of conservation easements included in (c) acquired after				
				the organization during
		rreu, releaseu, extiligaistieu, or t	eriiiiiatea by	the organization during
Nu	mber of states where property subject to conserva	ation easement is located 🛌		
			tion, handling (of violations, and Yes No
Sta	aff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation	on easements	during the year 🛌
		ng, and enforcing conservation ea	asements duri	ng the year
	·	(d) above satisfy the requiremen	ets of soction	
		(d) above satisfy the requirement	its of section	┌ Yes
ba	lance sheet, and include, if applicable, the text of	he footnote to the organization's		
rt II				ther Similar Assets.
art	, historical treasures, or other similar assets held	for public exhibition, education o	r research in f	
hıs	torical treasures, or other similar assets held for	oublic exhibition, education, or re		
(i)	Revenues included in Form 990, Part VIII, line 1			► \$
(ii)	Assets included in Form 990, Part X			▶ \$
Ift	the organization received or held works of art, hist		assets for fina	ncial gain, provide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Titl Organizations Maintaining Co	llections of Ar	t, His	tori	cal Tr	easu	ires, or C	<u>)the</u>	<u>r Similar As</u>	sets (<u>continued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	y of th	he fol	lowing t	that ar	e a signific	ant u	se of its collec	tion	
а	Public exhibition		d	\vdash	Loan	orexc	hange prog	rams			
ь	Scholarly research		e	\vdash	Other	-					
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and eval	ain ho	w tha	v furthe	ar the c	organization	n'c av	emnt nurnose	ın	
7	Part XIV						_			111	
5	During the year, did the organization solicition assets to be sold to raise funds rather than t									┌ Yes	□ No
Par	t IV Escrow and Custodial Arrang	ements. Compl	ete ıf	the	organ	ızatıor				•	
	Part IV, line 9, or reported an an										
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interm	ediary	for c	ontribu	itions	or other ass	sets		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follov	ving t	able		г		<u> </u>		
							-		An	nount	
С	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, Iır	ne 21?	,						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	<i>(</i>									
Pa	rt V Endowment Funds. Complete	ıf the organızatıo	n ans	wer	ed "Ye						
		(a)Current Year	(b) Prior	Year	(c) Tw	o Years Back	(d)	Three Years Back	(e)Four	Years Back
1a	Beginning of year balance							_			
b	Contributions							_			
C	Investment earnings or losses										
d	Grants or scholarships							_			
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment										
ь	Permanent endowment >										
c	Term endowment ►										
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that	are held	d and a	dministere	d for	the		
	organization by	ooron or and organiz								Yes	s No
	(i) unrelated organizations								3a	(i)	
	(ii) related organizations								3a((ii)	<u> </u>
b	If "Yes" to 3a(II), are the related organization	•						•	3	b	
4	Describe in Part XIV the intended uses of th										
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa	art X	, line 1	10.	I		I		
	Description of property) Cost or is (inves		(b) Cost or o		(c) Accumulated depreciation	d (d)	Book value
1a	Land										
Ь	Buildings										
c I	Leasehold improvements						5,43:	1,983	2,347,39	91	3,084,592
d I	Equipment							, 5,707		_	138,079
	Othor							3,138		_	1,691,049
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>		mn (B), line	10(c).)						4,913,720
	(, , , , , , , , , , , , , , , , , , ,	,,,	()		1.7.7			•) (Form	990) 2011

Part VII Investments—Other Securities. See F	orm 990, Part X, line 12	2.	
(a) Description of security or category	(b) Book value		od of valuation
(including name of security)	, ,	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests	8,988,094		F
(3)Other (A) FARM BUREAU BANCORP SUBORDINATED DEBT			
NOTE	1,000,000		F
(B) FB BANCORP COMMON STOCK	4,305,433		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	14,293,527		
Part VIII Investments—Program Related. See	Form 990, Part X, line:		
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990. Part X. col (B) line 13)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, line			
(a) Description			(b) Book value
(a) bosonp			(D) Dook value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15			
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
DEFERRED RENT EXPENSE	1,913,585		
DEFERRED LEASE INCENTIVE	1,406,406		
DEFERRED LEAST INCENTIVE	1,100,100		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	3,319,991		
2 Fin 48 (ASC 740) Footpate In Part VIV provide the text			

2 27,469,275 3 Excess or (deficity for the year Subtract line 2 from line 1 3 6-42,667 5 5 5 5 5 5 5 5 5	1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,826,609
Net unrealized gains (losses) on investments 5	2	Total expenses (Form 990, Part IX, column (A), line 25)	2	27,469,276
5	3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-642,667
Figure F	4	Net unrealized gains (losses) on investments	4	838,678
Prior period adjustments	5	Donated services and use of facilities	5	
Society Describe in Part XIV Society S	6	Investment expenses	6	
9 1,039,808 10 Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 10 397,141 Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements.	7	Prior period adjustments	7	
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 10 397,141	8	Other (Describe in Part XIV)	8	201,130
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 10 397,141 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201 201	9		9	1,039,808
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 1 26,563,546 Amounts included on line 1 but not on Form 990, Part VIII, line 12 2a 838,678 B	10		10	
1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 2 E 2 C 4 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part II, line 12) 5 Total expenses not uncluded on Form 990, Part IX, line 25 c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Cescribe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 4a and 4b c Other (Describe in Part XIV) c Add lines 5a and 4c. (This should equal Form 990, Part I, l	Par		er Re	
Net unrealized gains on investments	1	<u> </u>		
b Donated services and use of facilities 2b 4 c Recoveries of prior year grants 2c 3 d Other (Describe in Part XIV) 2d -362,495 e Add lines 2a through 2d 2e 476,183 3 Subtract line 2e from line 1 3 26,087,363 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 3 26,087,363 4 Amounts included on Form 990, Part VIII, line 7b 4a 739,246 4c 739,246 5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 26,826,609 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements with Expenses per Return 1 Total expenses and use of facilities 2a 4a	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
c Recoveries of prior year grants 2c d Other (Describe in Part XIV) 2d -362,495 e Add lines 2a through 2d 2e 476,183 3 Subtract line 2e from line 1 3 26,087,363 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 4a 4a a Investment expenses not included on Form 990, Part VIII, line 7b 4a 739,246 c Add lines 4a and 4b 4c 739,246 5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 26,826,609 2art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements with Expenses per Return 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 1 26,066,869 a Donated services and use of facilities 2a 1 26,066,869 b Prior year adjustments 2b 1 26,066,869 d Other (Describe in Part XIV) 2d 1,785	а	Net unrealized gains on investments		
d Other (Describe in Part XIV) 2d -362,495 4 476,183 3 26,087,363 3 26,087,363 3 26,087,363 3 26,087,363 3 26,087,363 3 26,087,363 3 26,087,363 3 26,087,363 3 26,087,363 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 4a 4a 4a 4a 739,246 4c 739,246 5 26,826,609 2a 4a 739,246 5 26,826,609 2a 4a 739,246 5 26,826,609 2a 5 26,826,609 2a 4a 739,246 4c 739,246 5 26,826,609 2a 4a 739,246 5 26,826,609 2a 2a </th <th>b</th> <th>Donated services and use of facilities</th> <th></th> <th></th>	b	Donated services and use of facilities		
e Add lines 2a through 2d 2e 476,183 3 Subtract line 2e from line 1 3 26,087,363 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 5 6 6 739,246 6 739,246 6 739,246 6 739,246 6 739,246 739,246 6 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 739,246 736	c	Recoveries of prior year grants		
Subtract line 2e from line 1	d	Other (Describe in Part XIV)		
A mounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b . 4a b Other (Describe in Part XIV)	e	Add lines 2a through 2d	2e	476,183
Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b 739,246 4c 739,246 4c 739,246 4c 739,246 4c 739,246 4c 739,246 4c 739,246 5 70tal Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	3	Subtract line 2e from line 1	3	26,087,363
b Other (Describe in Part XIV)	4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a dd lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	b	Other (Describe in Part XIV)		
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements	С		4c	739,246
Total expenses and losses per audited financial statements	_		_	
statements			per	
Donated services and use of facilities	1		1 1	26,066,869
b Prior year adjustments	2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
c Other losses 2c 4 d Other (Describe in Part XIV) 2d 1,785 e Add lines 2a through 2d 2e 1,785 3 Subtract line 2e from line 1 3 26,065,084 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: 4a 4a a Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,404,192 b Other (Describe in Part XIV) 4b 1,404,192 c Add lines 4a and 4b 4c 1,404,192 5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5 27,469,276	а	Donated services and use of facilities		
dOther (Describe in Part XIV)2d1,785eAdd lines 2a through 2d2e1,7853Subtract line 2e from line 1326,065,0844A mounts included on Form 990, Part IX, line 25, but not on line 1:4aaInvestment expenses not included on Form 990, Part VIII, line 7b4abOther (Describe in Part XIV)4b1,404,192cAdd lines 4a and 4b4c1,404,1925Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)527,469,276	b	Prior year adjustments	1	
Add lines 2a through 2d	c	Other losses	1	
3 Subtract line 2e from line 1	d	Other (Describe in Part XIV)		
A mounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV)	е	Add lines 2a through 2d	2e	1,785
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	3	Subtract line 2e from line 1	3	26,065,084
b Other (Describe in Part XIV) 4b 1,404,192 c Add lines 4a and 4b 4c 1,404,192 5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5 27,469,276	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	b	Other (Describe in Part XIV)		
	C		4c	1,404,192
		<u> </u>	5	27,469,276

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE FEDERATION'S APPLICATION OF GAAPUSA REGARDING UNCERTAIN TAX POSITIONS HAD NO EFFECT ON ITS FINANCIAL POSITION AS MANAGEMENT BELIEVES THE FEDERATION HAS NO MATERIAL UNRECOGNIZED INCOME TAX BENEFITS THE FEDERATION WOULD ACCOUNT FOR ANY POTENTIAL INTEREST OR PENALTIES RELATED TO POSSIBLE FUTURE LIABILITIES FOR UNRECOGNIZED INCOME TAX BENEFITS AS INCOME TAX EXPENSE THE FEDERATION IS NO LONGER SUBJECT TO EXAMINATION BY TAX AUTHORITIES FOR FEDERAL, STATE OR LOCAL INCOME TAXES FOR PERIODS BEFORE 2009
PART XI, LINE 8 - OTHER ADJUSTMENTS		EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES 96,030 PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST 105,100 TOTAL TO SCHEDULE D, PART XI, LINE 8 201,130
PART XII, LINE 2D - OTHER ADJUSTMENTS		EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES - 362,495
PART XII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT INCOME FROM AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 6,071 GAIN (LOSS) ON SALE OF PROPERTY AND EQUIPMENT -1,785 CONTRIBUTIONS FROM AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 308,421 SALE OF INVENTORY - NETTED AGAINST EXPENSES 15,239 SPONSORSHIP REVENUE NETTED AGAINST EXPENES 411,300
PART XIII, LINE 2D - OTHER ADJUSTMENTS		GAIN (LOSS) ON SALE OF PROPERTY AND EQUIPMENT 1,785
PART XIII, LINE 4B - OTHER ADJUSTMENTS		EXPENSES OF AFBF LEGAL ADVOCACY - SINGLE MEMBER LLC 977,653 SALE OF INVENTORY - NETTED AGAINST EXPENSES 15,239 SPONSORSHIP REVENUE NETTED AGAINST EXPENES 411,300

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

AMERICAN FARM BUREAU FEDERATION

OMB No 1545-0047

DLN: 93493276006453

Employer identification number

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspection

						36-0/25160	
Part I General Informatio	n on Grants and	d Assistance					
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	ard the grants or as	sıstance [?]			the grants or assist	ance, and	F Yes □ ۱
Part II Grants and Other A Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Addıtıonal Data Table							
2 Entertatel number of costs = 50	11(0)(3) 074 70	ment ergenizations list	end in the line 1 table			<u> </u>	7
Enter total number of section 50Enter total number of other orga		_				_	
2 Litter total number of other orga	zaciono nocca in ci	io inic i table i i i	<u> </u>	<u> </u>		<u> </u>	<u> </u>

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered	"Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
		•	•	•	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 CONTRIBUTIONS ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS
MONITORING GRANTS		DURING THE BUDGET APPROVAL PROCESS THE CONTRIBUTIONS APPROVED BY THE BOARD MEET THE MISSION
IN THE U S		OF THE ORGANIZATION SINCE THE FUNDS ARE TO BE USED FOR THE GENERAL SUPPORT OF AGRICULTURAL
		PROGRAMS, THE RECIPIENTS ARE NOT REQUIRED TO SUBSTANTIATE THEIR EXPENDITURES RELATED TO THESE
		CONTRIBUTIONS

Software ID: Software Version:

EIN: 36-0725160

Name: AMERICAN FARM BUREAU FEDERATION

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AGRICULTURAL & APPLIED ECONOMICS ASSN 555 E WELLS ST SUITE 1100 MILWAUKEE, WI 53202	54- 1384916	501(C)(3)	5,000			GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
ANIMAL AGRICULTURE ALLIANCE2101 WILSON BLVD SUITE 916B ARLINGTON, VA 22201	54- 1384916	501(C)(3)	5,000			GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	• •	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGRESSIONAL SPORTSMEN'S FOUNDATION110 NORTH CAROLINA AVE SE WASHINGTON, DC 20003	52- 1686163	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
COUNCIL FOR AGRICULTURAL SCIENCE & TECHNOLOGY4420 W LINCOLN WAY AMES, IA 500143447	23- 7186154	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDISON ELECTRIC INSTITUTE701 PENNSYLVANIA AV NW WASHINGTON, DC 200042696	13- 0659550	501(C)(6)	10,000			GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
GRAY & OSCAR LLC 6354 ALDERMAN DR ALEXANDRIA, VA 22315	54- 2014614		5,000			GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MINOR CROP FARMERS ALLIANCE 1901 PENNSYLVANIA AVE NW WASHINGTON, DC 20006	54- 1608554	501(C)(6)	7,500				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
NATIONAL 4-H CONGRESS FOUNDATIONPO BOX 367 ALPHARETTA, GA 30009	54- 1608554	501(C)(6)	10,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FFA FOUNDATIONPO BOX 68960 INDIANAPOLIS,IN 462680960	54- 6044662	501(C)(3)	45,250				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
POLICY DIRECTIONS INC 818 CONNECTICUT AVE NW SUITE 950 WASHINGTON, DC 20006	52- 1907369		6,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RURAL SCHOOL & COMMUNITY TRUST 4455 CONNECTICUT AV NW WASHINGTON, DC 20008	56- 1924246	501(C)(3)	5,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
US FARMERS & RANCHERS ALLIANCE16020 SWINGLEY RIDGE RD CHESTERFIELD, MO 63017	27- 3754267	501(C)(6)	300,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	 (f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED STATES COUNCIL FOR INTERNATIONAL BUSINESS1212 AVENUE OF THE AMERICAS NEW YORK, NY 10036	13- 1525134	501(C)(6)	5,000			GENERAL SUPPORT OF AGRICULTURAL PROGRAMS
US CHAMBER OF COMMERCE1615 H STREET NW WASHINGTON, DC 20062	53- 0045720	501(C)(6)	5,000			GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE600 MARYLAND AVENUE SW WASHINGTON, DC 20024	36- 6169577	501(C)(3)	115,000				GENERAL SUPPORT OF AGRICULTURAL PROGRAMS

DLN: 93493276006453

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

For certain Officers, Directors, Trustees, Key Employees, and Highest

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	the o	orga niza	tion
AMERICAN	FARM	I BUREAU	FEDERATIO

Employer identification number

36-0725160

Pa	Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	▼ Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the oreimbursement orprovision of all the expenses desc			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive				,,	
	officers, directors, trustees, and the CLO/Executive	e Directo	or, regarding the items thetked in line 14.	2	Yes	
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all t					
	∇ Compensation committee	Γ	Written employment contract			
	✓ Independent compensation consultant	⋝	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	nt?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in Part III	n Regs :	section 53 4958-4(a)(3)? If "Yes," describe			
				8		
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	'	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) BOB STALLMAN	(I) (II)	683,646 0	0	0 0	210,000	12,806 0	906,452	
(2) ELLEN STEEN	(I) (II)	238,159	0 0	0	61,443	1,643 0	301,245	,
(3) JULIE ANNA POTTS	(I) (II)	241,279 0	0	0	61,725	15,952 0	318,956	
(4) MARK A MASLYN	(I) (II)	245,246 0	0	T T	64,637	10,989	320,872	
(5) DONALD M LIPTON	(I) (II)	200,008	0	O C	53,083	12,581 0	265,672	,
(6) CHRISTINA S LILJA	(I) (II)	181,384 0	0	0	48,326	8,568 0	238,278	,
(7) MARGEE WOLFE	(I) (II)	160,691 0	0	0 C	43,041	18,763 0	222,495	,
(8) ROBERT E YOUNG	(I) (II)	233,727 0	0	0 C	61,695	13,192 0	308,614	,
(9) MARY KAY THATCHER	(I) (II)	181,273 0	0	0 C	48,298	8,552 0	2 238,123	,
(10) PAUL SCHEGEL	(I) (II)	160,243 0	0	O C	42,927	1,252 0	2 204,422	,
(11) DAVID C FRANCIS	(I) (II)	160,934 0	0	0	43,103	12,851 0	216,888	
(12) RICHARD L KRAUSE	(I) (II)	153,949 0	0	0	41,319	12,276 0	207,544	
(13) RICHARD NEWPHER	(I) (II)	585,547 0	0	0 0	106,178	10,582	702,307	,
				-		,		<u> </u>
		+		<u> </u>		,	-	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	1A	STACY BRYAN (SPOUSE OF BOB STALLMAN, PRESIDENT) AND NANCY NEWPHER (SPOUSE OF DICK NEWPHER, EXT VICE PRESIDENT) TRAVEL TO AFBF MEETINGS WHERE THERE ARE SCHEDULED BUSINESS ACTIVITIES THE AFBF BOARD OF DIRECTORS JUNE BOARD MEETING INCLUDED TRAVEL EXPENSES FOR SPOUSES/COMPANIONS FOR SCHEDULED BUSINESS ACTIVITIES THE SCHEDULED ACTIVITIES AT THE MEETINGS MAY INCLUDE OFFICIAL MEETING OF SPOUSES OR COMPANIONS TO INFORM EACH OF THEM ON THE VARIOUS ISSUES FACING AFBF, EDUCATIONAL PRESENTATIONS REGARDING THE INDIVIDUAL STATE FARM BUREAU ACTIVITY AND THE AGRICULTURE OF THE HOST STATE, VISITS TO AGRICULTURAL PRODUCTION FACILITIES, PROGRAMS AND TOURS OF STATE AND COUNTY FARM BUREAU OFFICES, VARIOUS AGRICULTURAL ACTIVITIES PROVIDED BY HOSTING STATE FARM BUREAU, OR VISITS TO AGRICULTURAL PROCESSING AND MARKETING FACILITIES
	4B	EFFECTIVE JANUARY 1, 2011, THE FEDERATION ADOPTED A 457(F) DEFERRED COMPENSATION PLAN (THE 457(F) PLAN) FOR ITS CURRENT PRESIDENT AND FORMER EXECUTIVE VICE PRESIDENT SHALL HAVE A FULLY VESTED, NONFORFEITABLE INTEREST IN HIS DEFERRED COMPENSATION IF THE FEDERATION DISSOLVES OR IF EACH INDIVIDUAL (1) DIES, (2) BECOMES DISABLED, OR (3) INVOLUNTARILY SEPARATES FROM SERVICE WITHOUT CAUSE FOR 2011 THE PRESIDENT ACCRUED DEFERRED COMPENSATION BENEFITS OF \$210,000 AND THE FORMER EXECUTIVE VICE PRESIDENT ACCRUED DEFERRED COMPENSATION BENEFITS OF \$102,358

Schedule J (Form 990) 2011

OMB No 1545-0047

Open to Public . Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Name of the organization AMERICAN FARM BUREAU FEDERATION

Employer identification number

36-0725160

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	AFBF MEMBERS ARE THE STATE FARM BUREAU'S AND PRESIDENTS OF THOSE STATE FARM BUREAU'S SIT ON AFBF BOARD OF DIRECTORS THIRTY-ONE OF THE BOARD MEMBERS OF AFBF ARE STATE FARM BUREAU PRESIDENTS THE BOARD POSITIONS ARE DETERMINED BASED ON THE FOLLOWING INTERPRETATION OF SECTION 4, ARTICLE VIII OF THE AFBF BY LAWS TOTAL MEMBERSHIP - BOARD POSITIONS UNDER 200,001 - 4 200,001 - 600,000 - 5 600,001 - 1,000,000 - 6 1,000,001 - 1,400,000 - 7 1,400,001 - 1,800,000 - 8 1,800,001 - 2,200,000 - 9 2,200,001 - 2,600,000 - 10 2,600,001 - 3,000,000 - 11 3,000,001 - 3,400,000 - 12 3,400,001 - 3,800,000 - 13 3,800,001 - 4,200,000 - 14 THE BOARD POSITIONS ARE DETERMINED BY THE 4 REGIONS NORTHEAST MIDWEST WEST SOUTH IN ADDITION TO THE 4 REGIONS AND MEMBERSHIP DETERMINING THE NUMBER OF BOARD POSITIONS FOR EACH OF THE REGIONS - THE AFBF WOMEN'S COMMITTEE CHAIRMAN AND AFBF YF&R'S COMMITTEE CHAIRMAN ALSO HAVE A SEAT ON THE AFBF'S BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION A, LINE 7A	SEE RESPONSE TO PART VI, SECTION A, QUESTION 6
	FORM 990, PART VI, SECTION B, LINE 11	GOVERNING BODY REVIEW OF THE FORM 990 - THE BOARD RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE AND REVIEW THE ORGANIZATION'S FORM 990 MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND PROVIDES A FULL COPY TO THE EXECUTIVE COMMITTEE OF THE ORGANIZATION THE EXECUTIVE COMMITTEE MEETS WITH MANAGEMENT TO REVIEW THE FORM 990 THE AFBF BOARD OF DIRECTORS REVIEWS THE FORM 990 AT THE OCTOBER BOARD MEETING PRIOR TO FILING THE FORM 990
	FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS, DIRECTORS AND EMPLOYEES ARE ANNUALLY REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AS A PRESCURSOR TO THEIR SERVICE TO THE ORGANIZATION POTENTIAL CONFLICTS ARE LOGGED WITH AND MONITORED BY THE SECRETARY OF THE BOARD
	FORM 990, PART VI, SECTION B, LINE 15	AMERICAN FARM BUREAU FEDERATION (AFBF) MAINTAINS A GRADE STRUCTURE AND PAY FOR PERFORMANCE SYSTEM TO ADMINISTER COMPENSATION DECISIONS AND ENSURE THAT EMPLOYEES ARE PAID ACCORDING TO FAIR, EQUITABLE AND UNIFORM PRINCIPLES THIS PROGRAM HAS BEEN ADOPTED BY THE ORGANIZATION'S BOARD OF DIRECTORS EACH YEAR, AFBF REVIEWS ITS GRADE STRUCTURE TO DETERMINE IF THE RANGES NEED TO BE ADJUSTED BASED ON FACTORS SUCH AS COST OF LIVING AND CHANGES IN THE INDUSTRY AFBF WILL OFTEN CONSULT WITH A THIRD PARTY TO REVIEW THE GRADE STRUCTURE AND CONDUCT A REVIEW OF MARKET DATA THE GRADE RANGES MAY BE SHIFTED IN ACCORDANCE WITH MARKET OR SURVEY DATA AFBF CONDUCTS PERFORMANCE REVIEWS ANNUALLY THROUGH AN ONLINE SYSTEM UTILIZING A STANDARD TEMPLATE APPROVED BY THE AFBF MANAGEMENT TEAM AND EXECUTIVE VICE PRESIDENT THE TEMPLATE HAS PERFORMANCE CATEGORIES WITH SEVERAL COMPETENCIES UTILIZED TO ASSESS PERFORMANCE IN EACH AREA SUPERVISORS COMPLETE THE REVIEWS, AND THE OVERALL PERFORMANCE RATING FOR EACH EMPLOYEE DETERMINES THEIR ANNUAL SALARY INCREASE HUMAN RESOURCES REVIEWS EACH COMPLETED PERFORMANCE REVIEW DOCUMENT THE PERCENTAGE SALARY INCREASE FOR VARIOUS PERFORMANCE RATING AVERAGES IS SUBJECT TO THE APPROVAL OF THE EXECUTIVE VICE PRESIDENT AND THE OVERALL BUDGET APPROVED BY THE AFBF BOARD OF DIRECTORS EMPLOYEES ARE NOTIFIED OF ANY INCREASE IN PAY AFTER THE OCTOBER BOARD MEETING THE PRESIDENT'S COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE OF THE ORGANIZATION AND IS REPORTED TO THE BOARD OF DIRECTORS DURING THE BUDGET PROCESS
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS - FINANCIAL STATEMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 838,678 EQUITY IN NET INCOME (LOSS) OF SUBSIDIARIES 96,030 PENSION RELATED CHARGES OTHER THAN NET PERIODIC PENSION COST 105,100 TOTAL TO FORM 990, PART XI, LINE 5 1,039,808

DLN: 93493276006453

OMB No 1545-0047

Related Organizations and Unrelated Partnerships

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► See separate instructions.

Employer identification number Name of the organization AMERICAN FARM BUREAU FEDERATION 36-0725160 Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

► Attach to Form 990.

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) AFBF LEGAL ADVOCACY PROGRAM LLC 600 MARYLAND AVE SW SUITE 1000 WASHINGTON, DC 20024 65-1294705	AFBF LEGAL ADVOCACY PROGRAM, LLC A SINGLE MEMBER LLC	DE	314,492		AMERICAN FARM BUREAU FEDERATION

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	Section 51 contro organiz	olled				
600 MARYLAND AVE SW STE 1000	ACCUMULATES & DISTRIB FUNDS FOR MATERIALS, PROGRAM DEV GRANTS AND EDUCATION	IL	501(C)(3)		AMERICAN FARM BUREAU FEDERATION	Yes Yes	No				
36-6169577	GRANTS AND EDUCATION										
For Drivery Act and Danonwork Poduction Act Notice con the Inst	or Privacy Act and Panerwork Poduction Act Notice see the Instructions for Form 990										

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part 1	V, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gener mana partr	ral or iging	(k) Percentage ownership
							Yes	No		Yes	No	
											i	
											i	
										·		

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) AMERICAN FARM BUREAU INC (AFBI) 600 MARYLAND AVE SW SUITE 1000W WASHINGTON, DC 20024 36-3250406	BUSINESS MANAGEMENT		AMERICAN FARM BUREAU FEDERATION	С	1,304,894	2,675,864	100 000 %

 ${f r}$ O ther transfer of cash or property from related organization(s)

ched	ule R (Form 990) 2011		Рa	ge 3
Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
-	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b	Yes	
C	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f		No
g	Purchase of assets from related organization(s)	1g		No
h	Exchange of assets with related organization(s)	1h		No
i l	Lease of facilities, equipment, or other assets to related organization(s)	1i		No
j l	Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		No
I F	Performance of services or membership or fundraising solicitations by related organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	
n	Sharing of paid employees with related organization(s)	1n	Yes	
o	Reimbursement paid to related organization(s) for expenses	10		No
p	Reimbursement paid by related organization(s) for expenses	1р	Yes	
q	O ther transfer of cash or property to related organization(s)	1q		No

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE	В	115,000	MAINTAINED RECORDS AT FMV
(2) AMERICAN FARM BUREAU FOUNDATION FOR AGRICULTURE	Р	529,377	MAINTAINED RECORDS AT FMV
(3) AMERICAN FARM BUREAU INC	Р	645,566	MAINTAINED RECORDS AT FMV
(4)			
(5)			
(6)			

No

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

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Schedule R (Form 990) 2011